24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Concerned American Voters	C C00525899
	C 000323099
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
i360	08 06 2015
Mailing Address PO Box 37046	Amount
City State Zip Code	2500.00
Baltimore MD 21297	Transaction ID : SE.5658 Date of Disbursement or Obligation
Purpose of Expenditure Voter Data and Outreach Capability Category/ Type 004	08
Name of Federal Candidate Support Office	e Sought: House District: 00
PAND DALII	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
i360	08 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 37046	Amount
City State Zip Code	8300.00
Baltimore MD 21297	Transaction ID : SE.5659 Date of Disbursement or Obligation
Purpose of Expenditure Estimate of August Monthly Outbound Phone Fees Category/ Type 004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District: 00
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	10800.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
= 3.10	08 07 2015
Signature	